

COUNTY OF LOS ANGELES DEPARTMENT OF AUDITOR-CONTROLLER

KENNETH HAHN HALL OF ADMINISTRATION 500 WEST TEMPLE STREET, ROOM 525 LOS ANGELES, CALIFORNIA 90012-2766 PHONE: (213) 974-8301 FAX: (213) 626-5427

J. TYLER McCAULEY AUDITOR-CONTROLLER

WENDY L. WATANABE CHIEF DEPUTY

June 14, 2007

TO:

Supervisor Zev Yaroslavsky, Chairman

Supervisor Gloria Molina Supervisor Yvonne B. Burke

Supervisor Don Knabe

Supervisor Michael D. Antonovich

FROM:

J. Tyler McCaule∳∫

Auditor-Controller

SUBJECT:

TOPANGA-ROSCOE CORPORATION dba TOPANGA WEST GUEST

HOME CONTRACT COMPLIANCE REVIEW - MENTAL HEALTH

SERVICES PROVIDER

We have completed a contract compliance review of Topanga-Roscoe Corporation dba Topanga West Guest Home (Topanga West or Agency) a Department of Mental Health (DMH) services provider.

Background

DMH contracts with Topanga West, a private for-profit community-based organization, which provides services to clients in Service Planning Area 2. The services that Topanga West provides include assessing mental health needs of the participants and developing and implementing treatment plans. The Agency's headquarters is located in the Fifth District.

Our review focused on approved Medi-Cal billings where at least 35% of the total service cost was paid using County General Funds. DMH paid Topanga West \$2.28 per minute of staff time (\$136.80 per hour) and \$81.16 per half-day for services that received this type of funding. DMH contracted with Topanga West to provide approximately \$533,000 in services for Fiscal Year 2005-06.

Purpose/Methodology

The purpose of the review was to determine whether Topanga West provided the services outlined in their contract with the County. We also evaluated whether the Agency achieved planned service levels. Our monitoring visit included a review of a sample of the Topanga West billings, participant charts, and personnel and payroll records. We also interviewed staff from Topanga West and a sample of clients.

Results of Review

Generally, Topanga West maintained documentation to support the services billed and the Agency used qualified staff. However, the Agency did not maintain the required staffing ratios for nine (90%) of the ten Day Rehabilitation days tested. In addition, Topanga West did not always complete the clients' Progress Notes and Weekly Summaries in accordance with the County contract. For example, sixteen (80%) Weekly Summaries and one (20%) Progress Note did not describe what the client or service staff attempted and/or accomplished towards the client's goals. In addition, five (100%) Progress Notes, documenting services with more than one staff present during an intervention, did not describe the specific contribution of each staff person and did not include the duration of each staff's time.

We have attached the details of our review along with recommendations for corrective action.

Review of Report

We discussed the results of our review with Topanga West on May 8, 2007. In their attached response, the Agency generally agreed with the results of our review and described their corrective actions to address the findings and recommendations contained in the report. We notified DMH of the results of our review.

We thank Topanga West management for their cooperation and assistance during this review. Please call me if you have any questions or your staff may contact Don Chadwick at (626) 293-1102.

JTM:MMO:DC

Attachment

c: David E. Janssen, Chief Administrative Officer Dr. Marvin J. Southard, Director, Department of Mental Health Cary Buchman, President, Topanga West Public Information Office Audit Committee

CONTRACT COMPLIANCE REVIEW TOPANGA-ROSCOE CORPORATION dba TOPANGA WEST GUEST HOME FISCAL YEAR 2005-2006

BILLED SERVICES

Objective

Determine whether Topanga-Roscoe Corporation dba Topanga West Guest Home (Topanga West or Agency) provided the services billed in accordance with their contract with Department of Mental Health (DMH).

Verification

We reviewed all five billings totaling 90 service minutes billed and judgmentally selected 20 half-day billings from 233 service half-days of approved Medi-Cal billings to DMH where at least 35% of the total service cost was paid using County General Funds. We reviewed the Progress Notes, Weekly Summaries, Assessments and Client Care Plans maintained in the clients' charts for the selected billings. The 90 minutes and 20 days represent services provided to 14 program participants.

Results

Topanga West maintained Progress Notes to support the service minutes and maintained Weekly Summaries and sign-in sheets to support 95% of the service half-days billed to DMH. However, the Agency did not complete the five (100%) Progress Notes and 16 (80%) of 20 Weekly Summaries in accordance with the County contract. Specifically;

- Sixteen (80%) Weekly Summaries and one (20%) Progress Note did not describe what the clients or service staff attempted and/or accomplished towards the clients' goals.
- Five (100%) Progress Notes, documenting services with more than one staff present during an intervention, did not describe the specific contribution of each staff person and did not include the duration of each staff's time.

The total number of Progress Notes cited above exceeded the overall number of Progress Notes reviewed because some of the Progress Notes contained more than one deficiency.

Assessments

Topanga West did not complete Annual Assessment Updates for two (14%) of fourteen clients sampled, as required by the contract. An Assessment is a diagnostic tool used to document the clinical evaluation of each client and establish the client's mental health

treatment needs. An Annual Assessment Update verifies that services to the client continue to be necessary.

Recommendations

Topanga West management:

- 1. Maintain sufficient documentation to support its compliance with contract requirements for the services billed to DMH.
- 2. Ensure that Annual Assessment Updates are completed in accordance with the County contract.

CLIENT VERIFICATION

Objectives

Determine whether the program clients received the services that Topanga West billed DMH.

Verification

We interviewed nine participants that the Agency billed DMH for services during the months of May and June of 2006.

Results

The nine program participants interviewed stated that they received services from the Agency and that the services met their expectations.

Recommendation

There are no recommendations for this section.

STAFFING LEVELS

Objective

Determine whether the Agency maintained the appropriate staff to client ratio of 1:10 in its Day Rehabilitation Program.

Verification

We selected ten days in May and June 2006 and reviewed the staff and client logs. We also reviewed staff timecards.

Results

Topanga's Day Rehabilitation attendees also included the Agency's residential treatment facility clients that were not billed to DMH. As a result, Topanga West did not meet the staffing ratios for nine (90%) of the ten days tested. The Agency maintained an average of 1:12 ratio for the nine days.

Recommendation

3. Topanga West management maintain appropriate staffing levels in the Day Rehabilitation program.

STAFFING QUALIFICATIONS

Objective

Determine whether Topanga West treatment staff possessed the required qualifications to provide the services.

Verification

We reviewed the California Board of Behavioral Sciences' website and/or the personnel files for three of the nine treatment staff at Topanga West.

Results

Each employee possessed the qualifications required to deliver the services billed.

Recommendation

There are no recommendations for this section.

SERVICE LEVELS

Objective

Determine whether Topanga West's reported service levels varied significantly from the service levels identified in the DMH contract.

Verification

We obtained the Cost Report submitted to DMH by Topanga West for Fiscal Year 2005-06 and compared the dollar amount and billed units of service to the contracted units of service identified in the contract for the same period.

Results

Overall, Topanga West provided the service levels outlined in the County contract. However, within specific service categories, the Agency significantly deviated from contracted service levels without prior written authorization from DMH. DMH management indicated that they were aware the Agency would deviate from contracted services levels. However, neither party could provide documentation to support the agreement, as required by the County Contract.

Recommendation

4. Topanga West management obtain a written authorization from DMH prior to deviating from contracted service levels.



May 31, 2007

County of Los Angeles
Depart of Auditor-Controller
J. Tyler McCauley, Auditor-Controller
Kenneth Hahn Hall of Administration
500 West Temple Street, Room 525
Los Angeles, CA 90012-2766

Response to Auditor Controller Draft Report

Topanga West has received the results for the Auditor-Controller Audit for services that were provided in May and June of 2006. We found the Auditor-Controller Staff that worked with us during this audit to be professional, pleasant and well informed about mental health programs. We experienced the audit process as beneficial and are grateful for the opportunity to highlight any areas in which we needed retraining. The following is our response to you and our corrections.

Billed Services:

1) Topanga West management maintain sufficient documentation to support its compliance with contract requirements for the services billed to DMH.

There were two issues that were identified in regard to documentation. One issue was a matter of staff compliance and the other of training.

In the Day Rehab Progress Notes it was identified that Staff did not describe what the client or service staff attempted and/or accomplished towards the client's goals. One staff member wrote all the weekly summaries in question. Subsequent to the audit, that staff member is no longer working with us and all staff have been retrained on the proper documentation of a progress note which should include the goal, intervention, client response, and plan. Quality Assurance staff will review notes on a monthly basis.

In regard to the Mental Health Services files, it was noted that each Staff's contribution was not stated in the Progress Note. It was the Clinic's understanding that as long as the need for two staff was established in the IS Group Set Up, that it did not need to be repeated in subsequent notes. Staff have all been re-trained in regard to how to write a Progress Note when more than one staff participates in a group and how to document each staff's time in the margin. Quality Assurance staff will review notes on a monthly basis.

2) Topanga West management ensure that Annual Assessment Updates are completed in accordance with the County contract.

In Day Rehab files Medical Necessity is established by completion of the Service Necessity Agreement, which is present in all files as a part of the authorization process for Day Rehab Services. There was some confusion as to whether an Annual Assessment Update needed to be completed when the more extensive Service Necessity Agreement form was already in place. Although Topanga West no longer offers Day Rehab Services, the staff has all been re-trained on this issue and on a monthly basis Quality Assurance staff will review the files to ensure that all required forms are in place.

Staffing Levels:

3) Topanga West management maintain appropriate staffing levels in the Day Rehabilitation program.

Topanga West has never provided services or billed for more clients than is indicated in the 1:10 staff ratio. The Day Rehab treatment area is adjacent to the patio where board and care residents smoke. In an attempt to not reject non program participants, the treatment staff did not discourage these individuals who were passing through the room to smoke or were stopping in to get a cup of coffee from signing the sign in sheet

Staff has been re-trained on the importance of keeping a sign in sheet, which reflects the accurate attendance to the group.

Service Levels:

4) Topanga West management obtain a written authorization from DMH prior to deviating from contracted service levels.

As was indicated at the exit interview DMH and Topanga West staff spoke frequently about any deviations from the contract but nothing was put in writing. Topanga West now understands the regulation that states that any deviations from the contract be documented in writing between the Department and Topanga West and will comply with this.

In here, not